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	UNITED STATES DISTRICT COURT, MIDDLE DISTRICT OF PENNSYLVANIA				
	KAREEM Milhouse				
	Plaintiff Civil Action No. 1: 19cv665				
·	V. JURY TRIAL DEMAND				
	FEDERAL BUREAU OF PRISONS,				
	UNITED STATES OF AMERICA,				
	ANDREW M. EDINGER,				
	JESSIE AYERS, FILED				
	JOHN DOES 1-10, SCRANTON				
	DEFENDANTS. APR 18 2019				
	PER				
	introduction				
(i)	THIS IS A CIVIL RIGHTS ACTION FOR DAMAGES FILED PURSUANT TO				
	BINENS V. SIX UNKNOWN AGENTS OF THE FEDERAL BUREAU OF NARCOTICS,				
	403 U.S. 388 (1971) FOR THE VIOLATION OF MR Millhouse's Right to				
	ADEQUATE MEDICAL CARE AS GUARANTEED AND PROTECTED by the				
	Constitution of THE United States; Combined with;				
	FERERAL TORT CLAIM ACT (FTCA) DE U.S.C. & DUTZ				
(2)	At All times Relevant to this Action, MR millhouse was A				
	PRISONER At the UNITED STATES PENITENTIARY - LEWIS BURG				
	IN LEWISBURG, PENNSYLVANIA AND/OR has been A PRISONER UNDER				
	the custody and control of the FEDERAL BUREAU OF PRISONS.				
(3)	DEFENDANTS INDIVIDUALLY AND COLLECTIVELY DEPRIVED MR MILLHOUSE				
	OF his FEDERALLY GUARANTEED RIGHTS by DENYING him ADEQUATE				
	MEDICAL CARE				
	(1)				

· ,	
(4)	All Allegations of this complaint are based on mr millhouse's
	belief AND INFORMATION CURRENTLY AVAILAble to him. FURTHER
	Discovery is needed to Determine, Among other things, All
	INDIVIDUALS INVOIVED AND the full extent of EACH DEFENDANTS
	AND other individuals action or omissions that deprived
	mk millhouse of ADEquAte MEDICAL CARE.
	JURISDICTION AND VENUE
(s)	THIS COURT has JURISDICTION UNDER 28 USC \$ 1331 BECAUSE this Action
	ARISES UNDER the CONSTITUTION AND LAWS OF THE UNITED STATES.
(6)	VENUE lies in the middle district of Pennsylvania under 28 uses
gantii ka Pila kaliika magada kiita salmagalay ayyaning paya ingaganya ahayya ahayya ahay	1391 because a substantial amount of the acts and omissions
	GIVING RISE to this complaint occurred in this District.
	Parties
(1)	mk millhouse is an abult individual presently incarcerated
1	At the united States Penitentiary - Lewisburg in Pennsylvania.
(8)	DEFENDANT FEDERAL BUREAU OF PRISONS MANAGES, GOVERNS AND
	Supervises A Currectional Facility, the united states Penitentiary
	- Lewisburg, with its PRINCIPAL PLACE OF busiNESS At 2400 Robert
	F. MillER DRIVE, LEWISBURG, PENNSYLVANIA 17837.
(9)	DEFENDANT UNITED STATES OF AMERICA EMPloy DEFENDANTS!
(10)	DEFENDANT ANDREW M. EDINGER IS AN ADULT INDIVIDUAL, WHO, AT
	All times relevant to this action resided in the District.
(ii)	DEFENDANT DESSIE AYERS IS AN A DULT INDIVIDUAL WHO, AT ALL
	times Relevant to this Action Resided in The District.
(i2)	DEFENDANT JOHN DOES 1-10 ARE ADOLT INDIVIDUALS AT ALL TIMES
	Relevant to this action, they were employed by, or agents
	(2)
	· t

	of the Federal Bureau of Prisons				
-					
	FAC+S				
. (14)	ON MARCH 8, 2017 MR MILLAUSE UNDERWENT A lumber laminectomy				
	(LY-SI INTERBODY Fusion with A metal CAGE).				
(15)	ON APRIL 17, 2017 HAD A SIX (6) WEEK POST-SURGICAL FOLLOW-UP				
	with the Surgeon at which time After mr millhouse Explained				
	that he is still experiencing numbress and Paralis in Parts				
	OF LOWER LEFT LES AND LEFT Foot.				
(is)(A)	MR MILLHOUSE NEVER RECEIVED FOLLOW UP CARE FOR LEFT KNEE				
	AFTER STERIOD INJECTION IN OCTOBER 2016				
	MR millhouse submitted numerous sickcall Requests explaining				
	that the Stairs Aggravate his knee				
(is)(B)	UPON ALRIVAL AUGUST 6,2018 DR EDINGER FAILED TO PROVIDE				
	medical shops Although mil millhouse HAD culter medical				
	Shoe Pass.				
(is/c)	on August 17,2018 DR. EDINGER FAILED TO EVALUATE MR MUTLLOUSE				
	FOR MEDICAL Shoes				
(15)(0)	ON NUMEROUS OCCUSIONS DESSIE AYERS, PA-C FALLD FACTED TO EVALUATE				
	ml millhouse For MEDICAL Shoes AND/OR ENSURE that me				
	millhouse has APPROVED MEDICAL Shoes.				

THE SURGEON SCHEDULED ANOTHER FOILOW UP FOR JULY, 2017 to WEHER ASSESS POST-(8) Surgical Complications. The Surgeon Also Recommended me milhouse continue to WEAR his BACK blace among other things. ON APRILIGIZOIT DEFENDANT EDINGER APPROACHED MR MILLHOUSE'S CEN AND STATED! " Sign this medical Refusal Stating you bo NOT want your duly, 2017 appointment So that I can lift the MED, Cal hold AND transfer you." INARAITION DEFENDANT EDINGER STATED: "IF YOU SIGN IT YOU WONT RECEIVE Follow of CARE At your Next Institution," MR millhouse REFOSED TO SIGN. DEFENDANT EDINGER THEN CAILED THE SURGEON WITH MATERY lifting the MEDICAL hold ON APRIL 19.2017, APPROXIMATELY (2) two hours LATER MR MINHOUSE WAS PACKED OUT AND TRANSFERRED ON APRIL 24, 2017, WITHOUT his "BACK BRACE" ON AUGUST 4, 2018 MR MILLHOUSE RETURNED TO "USP-CEWISBURG'S" SMILL ON August 17,2018 ml millhouse was evaluated by DEFENDANT EDINGER AND EXPLAINED TO DEFENDANT EDINGER THAT HIS LEFT KNEE HAS WORSTENED there was never any follow up care, that his lower body, left leg, LEFT FOOT - RIGHT LEG, AND LOWER BACK PAIN has WORSTENED. (18) DEFENDANT EDINGER STATED IN his CONSULTATION REPORT: " Inmate has a known history or Chronic cow back Pain, he is status - POST CUMBAR DECOMPRESSION AT LS-SI with bilateral NEUROFORAM -. ino tomies HE complains or NEW Dysesthesias/Paresthesias Down his Right leg combined with Pain, this Request is fol AN EMG or the RLE FOR ongoing NEURologic Symptoms Provisional Diagnosis! NEW LS RADICUIPATHY. ON OCHOBER 4, 2018 A NEV & EMG WAS CONDUCTED by MR HASAN ASKARI, M. D. THE RESULT OF THAT PROCEDURE WAS: "EVALUATION OF the Right Sulal Sensory NERVE Showed Prolong Distal PEAK LATEURY (4.1 ms) AND DECREASED CONDUCTION VELOCITY (CAIF-LAT MAIL 34 ms) ... NEEDLE EVALUATION OF the RIGHT LS PARASPINAL MUSCLE ShowED SLIGHTY INCREASED SPONTANEOUS ACTIVITY, THE RIGHT SI PARASPINAL MUSCLE ShowED MODERATELY INCREASED SPONTANEOUS ACTIVITY. (3) (A)

•	
<b>.</b>	Implession:
	within the technical [ limitations of the study, this cetter
, , , , , , , , , , , , , , , , , , ,	Physiological Bui Dence of:
(i)	my Demyelinating, Distal Peripheral Neuropathy Affecting the Right sural
	SENSORY NERVE AT the ANKLE.
(2)	otherwise the limited, Pertinent nerve condition exam of the Right Lower
	extremity is unremarkable.
(5)	EMG EXAM Shows EUIDENCE OF MILD LS-SI RADICUlpathy that is FURTHER
	supported by a Relative Delay in the Right Libial H REFLEX when compared
	to the left side, otherwise, limited but pertinent, Emg exam is
	un Remarkable.
	REcommendations:
(1)	PLEASE CONSIDER MRI OF LUMBOSACRAI SPINE.
(2)	Physical therapy consult.
(3)	ORTHOPERIC CONSULT.
(4)	Symptomatic CARE.
(5)	FURTHER RECOMMENDATIONS PER DISCRETION OF REFERRING PROVIDER
(20)	DEFENDANT EDINGER FAILED TO PRESCRIBED MR MILLHOUSE ANY PAIN.
	MEDICATION that WAS ADEQUATE AND/OR EFFECTIVE TO TREAT his
	DIAGNOSED CONDITIONS DESPITE "CENTRAL OFFICE" AND OTHER BOP
	RECOMMENDATIONS FOR AN "ADEQUATE" TRIAL OF FORMULARY MEDICATIONS.
	Fulthermore, DEFENDANT EDINGER STATED HE WAS OUT OF OPTIONS.
(14)	mk millhouse submitted numerous "siek call "Request to Acteurant
	DESSE AYERS TO TREAT his Chronic Pain which she "Ignored"
(11)	THE FEDERAL BUREAU OF PRISONS, AND DR EDINGER AUTHORIZED, RATIFIED, ACGUIT
	ESED IN ANDLOR CONDONED the Policy of custom of being Deliberately
	in Different to mr millhouse's Right TO ADEQUATE MEDICAL CARE.
(25)	THE FEDERAL BUREAU OF PRISONS, AND DEFENDANT EDINGER FAILED TO
	ADEQUATELY INVESTIGATE MR MILLHOUSE'S MEDICAL FRONTMENT AT THE
	united States Penitentially Lewisburg, Failed to ENSURE that mr
	Milhouse RECEINED ADEQUATE MEDICAL FREATMENT, AND FAILED
	(u)

(4)

to ADEQUATELY SUPERVISE the Employees AND DOCTORS WORKING At the united states Penitentiary Lewisburg in Regards to mk millhouse's medical treatment. (A4) DEFENDANT EDINGER IS RESPONSIBLE to have competent MEDICAL STAFF that WILL RENDER APPROPRIATE TREATMENT to PRISONERS AND FOLLOW PROCEDURES. DEFENDANT EDINGER IS THE HEAD DOCTOR AT LEWISBURG. EACH DEFENDANT WAS AWARE that MR MINIHOUSE SOFFERED FROM SERIOUS BACK AND NERVE PAID, AMONG OTHER MEDICAL CONDITIONS EACH DEFENDANT HAD A DUTY to ENSURE that MR MILLHOUSE RECEIVED AND LOR WAS NOT DENTED ADEQUATE MEDICAL CARE. EACH DEFENDANT MAD A DUTY to INVESTIGATE MR MILLHOUSE'S (28) MEDICAL CONDITION AND ANY COMPLAINTS HE MADE. (29) EACH DEFENDANT HAD A DUTY to FURTHER INVESTIGATE THE MEDICAL CARE PROVIDED to MR MILLHOUSE. (50) DESPITE THE SEVERITY OF his illuesses AND REPEATED REQUESTS FOR MEDICAL CARE, DEFENDANTS, INDIVIDUALLY AND COLLECTIVELY FAILED to OF PROVIDE ADEQUATE MEDICAL CARE to MR MILLHOUSE, (ii) ENSURE that MR millhouse RECEIVED ADEQUATE MEDICAL CARE, (III) ENSURE that MR MILLHOUSE WAS NOT DENIED ADEQUATE MEDICAL CARE, AND (iv) ADEQUATELY WATEStigAte Whether millhouse was RECEINING ADEQUATE MEDICAL CARE. AS A RESULT OF DEFENDANTS' Actions AND omissions, MR millhouse has suffered and continues to suffer physical injuries, including without limitations SERIOUS BACK AND NERVE Pain, Limitations on his ability to participate in Recleat-ION, AFFECTING his DAILY ROUTINE SUCH AS STEEPING AND Showers, AND other INJURIES that ARE NOT KNOWN because Among other things, mr millhouse has been Devied Abequate MEDICAL EXAMINATIONS by COMPETENT MEDICAL PROFESSIONALS

(92) AS A RESULT OF DEFENDANTS ACTIONS AND OMISSIONS, MR millhouse suffered mental anguish and emotional DISTRESS. EACH DEFENDANTS' CONDUCT WAS WINFUL WANTON, MALICIOUS AND INTENTIONAL COUNT 1: DENIAL OF MEDICAL CARE BUT EACH DEFENDANT ACTED UNDER COLOR OF LAW. 131 At AN RELEVANT TIMES MR MILLHOUSE HAD A SERIOUS MEDICAL NEED. (58) EACH DEFENDANT WAS DELIBERATELY INDIFFERENCE to MR millhouse's Serious medical Need, 1391 EACH DEFENDANT DISREGARDED that RISK by Failing to take REASONAble MEASURES to Abate it. HON EACH DEFENDANT WAS AWARE that MR MILLHOUSE WAS NOT RECEIVING ADEQUATE MEDICAL CARE. HILL EACH DEFENDANT HAD A DUTY to ENSURE that MR MILLIHOUSE RECEIVED ADEQUATE MEDICAL CARE AND FAILED to Do So. (47) EACH DEFENDANT ACTED IN CONSCIOUS DISREGARD OF A KNOWN AND SUBSTANTIAL RISK OF SERIOUS hARM to MR MILLHOUSE. H3 mR millhouse SUFFERED Physical AND PSYCHOLOGICAL HARM AS A DIRECT AND PROXIMATE RESULT OF DEFENDANTS' DELIBERATE INDIFFERENCE to his CONSTITUTIONAL RIGHT to ABEQUATE MEDICAL CARE (44) AS A DIRECT AND PROXIMATE RESUlt OF the DEFENDANTS' DELIBERATE INDIFFERENCE to MR MILLHOUSE'S CONSTITUTIONAL Rights, As guaranteed by, among other things, the fifth (6)

, 5	AMENDMENT, MR MILLHOUSE WAS DEPRIVED OF his Right to
	ADEQUATE MEDICAL CARE.
	COUNT 2: NEGLIGENT MEDICAL CARE
(esc)	AS A DIRECT AND PROXIMATE RESULT OF DEFENDANT
(70)	EDINGER'S NEGLIGENCE MR MILLHOUSE'S CONDITIONS
,	worstenes.
	WhoRe Folk mr millhouse PRAYS For JUDGEMENT AGAINST
	UNITED STATES, SUM CERTAIN OF \$ 10,000,000,00 FOR ADMINIS-
	TRATIVE CIAIM NO. TRT-NER-2018-03995 AND \$ 10,000,000,00 FOR
	ADMINISTRATIVE CLAIM NO. TAT. NER-2018 - OCIOY INCLUDING A DECLAR-
	Ation that DEFENDANTS VIOLATED his constitutional Rights,
	Compensatory DAMAGES AGAINST EACH DEFENDANT, JOINTY AND
	SEVERALLY, AND PUNITIVE DAMAGES AGAINST EACH DEFENDANT IN AN
	Amount to be Determined at trial, Along with Any other Relief
	the Pourt Deems Necessary AND PROPER. AND ADDITIONAL SUM
	CERTAIN OF \$100,000 FOR TORT CLAIM 2019-00477 AND \$200,000 FOR
	TORT CLAIM 2019-00478. SIGNED UNDER PENALTY OF PERSURY.
DAte D'	APRILI, 2019 3/ KLEM Doerse
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#### **Inmate Statement**

具 PRINT

Inmate Reg #: 59904066 **Current Institution:** Lewisburg USP MILLHOUSE, KAREEM Inmate Name: **Housing Unit:** LEW-E-A 03/28/2019 Report Date: Living Quarters: E02-216L

-					2			
Report Time:		11:15:52 A	.M .					
Alpha Code	Date/Time	Reference#	Payment#	Receipt#	Transaction Type	Transaction Amount	Encumbrance Amount Endir	
LEW	3/20/2019 9:02:23 AM	13			Sales	(\$2.65)		\$177.86
LEW	3/19/2019 7:48:29 AM	TFN0319			Phone Withdrawal	\$2.74		\$180.51
LEW	3/8/2019 10:07:20 AM	UICD0319 - 973			Debt Encumbrance	•	(\$0.01)	
LEW	3/7/2019 8:21:4 AM				Phone Withdrawal	(\$4.00)	•	\$177.77
LEW	3/7/2019 8:20:5: AM	2 TFN0307			Phone Withdrawal	\$3.95	•	\$181.77
LEW	3/6/2019 9:18:10 AM	0 TFN0306			Phone Withdrawal	(\$5.00)		\$177.82
LEW	3/6/2019 9:09:0 AM	5 1 1			Sales	(\$3.05)	_	\$182.82
LEW	3/5/2019 10:16:39 AM	TFN0305		·	Phone Withdrawal	\$2.00		\$185.87
LEW	3/5/2019 9:58:5 AM	I UFRP0319			FRP Quarterly Pymt	\$0.00		\$183.87
LEW	3/4/2019 7:35:14 PM	4 TFN0304			Phone Withdrawal	(\$2.00)		\$183.87
LEW	3/4/2019 7:34:00 PM	2 TFN0304			Phone Withdrawal	\$8.11		\$185.87
LEW	3/2/2019 6:06:20 PM	5 TFN0302			Phone Withdrawal	(\$8.00)		\$177.76
LEW	3/2/2019 5:44:09 PM	9 TFN0302			Phone Withdrawal	(\$2.00)		\$185.76
LEW	3/1/2019 6:06:43 PM	33319060			Western Union	\$50.00	•	\$187.76
LEW	3/1/2019 6:06:4			,	Debt Encumbrance		(\$10.00)	
LEW	PM 3/1/2019 6:06:4				Debt Encumbrance		(\$10.00)	
LEW	PM 3/1/2019 6:06:48				Debt Encumbrance		(\$10.00)	
LEW	PM 3/1/2019 6:06:4				Debt Encumbrance		(\$10.00)	
LEW	PM 3/1/2019 6:06:48				Debt Encumbrance		<b>(\$10.00)</b>	
LEW	PM 3/1/2019 9:39:31	919 3 TFN0301			Phone Withdrawal	\$10.00		\$137.76
LEW	AM 3/1/2019 9:27:1	7 TFN0301			Phone Withdrawal	(\$10.00)		\$127.76
LEW	AM 3/1/2019	GPHLD469 -			Debt Encumbrance -		\$5.00	
LEW	12:10:55 AM 3/1/2019	754 RLEWD436 -	•		Released Debt Encumbrance -		\$5.00	
LEW	12:10:55 AM 3/1/2019	755 SLEWD302 -			Released Debt Encumbrance -		\$5.00	*******
LEW	12:10:55 AM 3/1/2019	756 TMCRD007 -		•	Released Debt Encumbrance -		\$5.00	
LEW	12:10:55 AM 3/1/2019	757 TMCRD090 -			Released Debt Encumbrance -		\$5.00	****
LEW	12:10:55 AM 3/1/2019	758 TMCRD007			Released PLRA Payment	\$0.00		\$152.76
LEW	12:10:55 AM 3/1/2019	RLEWD436	1359		PLRA Payment	(\$5.00)		\$142.76
LEW	12:10:55 AM 3/1/2019	SLEWD302	1358	1	PLRA Payment	(\$5.00)		\$147.76
LEW	12:10:55 AM 3/1/2019	GPHLD469	1360	•	PLRA Payment	(\$5.00)		\$137.76
LEW	12:10:55 AM 2/6/2019 8:54:25	5 15			Sales	\$0.00		\$152.76
LEW	AM	33319032				\$25.00		\$152.76
		•			<del></del>	4-0.00		4.02.10

Case 1:19-cv-00d65-YK-EB Document 1 Filed 04/18/19

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MILLHOUSE, KAREEM Inmate Name:

Date of Birth: 08/04/1976

Encounter Date: 05/09/2017 13:02

Race: BLACK Sex:

Provider: Perkins, Edward MD/CD

Facility: MCR E04 Unit:

Reg #:

Ethibit

New Consultation Requests:

Consultation/Procedure

Target Date Scheduled Target Date Priority

Translator

59904-066

Language

Neurosurgery

05/16/2017

05/16/2017

Routine

No

Subtype:

Neurosurgery

Reason for Request:

IM underwent L5 spinal fusion on 3/8/17 - needs post op evaluation. Significant Left LE neuropathy.

Schedule:

**Activity** 

Date Scheduled Scheduled Provider

Chronic Care Visit

11/08/2017 00:00 MLP 03

Chronic Care Visit

05/07/2018 00:00 Physician

Other:

Follow- up at sick call and CCC as needed. To be evaluated by provider and placed on callout. Return or go to sick call if condition worsens or does not improve or for any untoward symptoms. DC to housing unit and work. WIII FU in 6 months and 1 year - sooner for any untoward symptoms. Inmate instructed to report any untoward symptoms.

**Patient Education Topics:** 

**Date Initiated Format** 

Handout/Topic

<u>Provider</u>

**Outcome** 

05/09/2017

Counseling

Access to Care

Perkins, Edward

Verbalizes Understanding

Discussed access to care, compliance with recommendations and treatment plan, Diet/exercise and wt. control, Medications R/B and possible side-effects and preventive care measures. Inmate to report any untoward symptoms.

Copay Required: No

Cosign Required: No

Telephone/Verbal Order: No

Completed by Perkins, Edward MD/CD on 05/18/2017 13:51

2 OF 19

EXHIBITS

TRULINCS 59904066 - MILLHOUSE, KAREEM - Unit: MCR-Z-A

STAL.

FROM: Health Service

TO: 59904066 MILLHOUSE, KAREEM SUBJECT: RE:\*\*\*Inmate to Staff Message\*\*\*

DATE: 06/16/2017 10:47 AM

You have a follow up scheduled with your provider very soon. I will forward your message to them to let them know your pain has increased. Watch the call outs for you to be called to medical. If you are not called to medical within a week, sign up for sick call like you were asked.

>>> ~^!"MILLHOUSE, ~^!KAREEM" <59904066@inmatemessage.com> 6/16/2017 9:53 AM >>>

To: KENNEDY

Inmate Work Assignment: NONE

I WAS TOLD TO SEND A COP OUT VIA HEALTH SERVICE BOX BECASE I HAVE A CHRONIC CARE ISSUE, HOWEVER BP-8,9,10, AND 11 STAE TO FOLLOW UP AT SICK CALL IF MY CONDITION WORSTEN MY BACK AND LOWER BODY PAIN IS WORST SINCE SURGERY MEANWHILE, WHEN I WAS ON 1800MG TWICE A DAY MY LOWER BODY PAIN WAS SEMI MANAGED. IBUPROFEN ISN'T DOING ANYTHING FOR MY BACK, PERIOD. IM IN IMMENSE PAINFROM THAT AND MY HANDS.

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7/3

TRULINCS 59904066 - MILLHOUSE, KAREEM - Unit: MCR-Z-A

FROM: Blue Sick Call

TO: 59904066 MILLHOUSE, KAREEM

SUBJECT: RE:\*\*\*Inmate to Staff Message\*\*\*

DATE: 07/06/2017 08:37 AM

As discussed during breakfast, your provider is aware of your concerns and you have an appointment scheduled with him. Please continue to watch the call outs.

>>> ~^!"MILLHOUSE, ~^!KAREEM" <59904066@inmatemessage.com> 7/6/2017 7:37 AM >>>

To: MEDICAL

Inmate Work Assignment: CONVELESENCE

I HAVE EXCRUCIATING BACK PAIN, I HAVE NO RELIEF FOR IT!THE COLD AIR AGGRAVATE IT!IBUPROFEN DOES NOT RELIEVE THE PAIN, I REALLY AM NOT SOPPOSE TO BE PRESCRIBED THAT BECAUSE OF THE BLOOD PRESSURE MEDICATIONS I'AM ON YOU KEEP SAYING WATCH THE CALL OUT TO SEE MY CARE PROVIDER BECAUSE MY ISSUES IS CHRONIC CARE, MEANWHILE YOU SAID I WAS TO SEE MY PROVIDER 6/28/17!WELL I HAVN'T SEEN ANYONE!ARE YOU SAYING THAT I CAN ONLY GET TREATMENT FOR MY ISSUES EVERY (6) MONTHS?! ADDRESSED THIS TO AW BARONE, WARDEN ORMOND, MR LENNEN ADMINISTRATIVE REMEDIES. WHAT ELSE MUST I DO?FILE A CIVIL SUIT?

4 OF 19

EXHIBIT

TRULINCS 59904066 - MILLHOUSE, KAREEM - Unit: MCR-Z-A

FROM: AW
TO: 59904066 MILLHOUSE, KAREEM
SUBJECT: RE:\*\*\*Inmate to Staff Message\*\*\*
DATE: 07/06/2017 03:37 PM

The physician evaluated you on 5/9/17 and performed a full exam. He also submitted a Neurosurgery consultation, but it was disapproved by the Region. The Regional Medical Doctor noted on May 31, 2017, "patient seen on follow up post surgery on 4/2017 in previous institution. Still with problems after surgery. Exam was unremarkable and recommendations to continue conservative treatment and order lumbosacral Xrays flexion and neutral". Your X-ray was completed on May 24, 2017. Since your arrival to USP McCreary, you have been evaluated at sick call on 4 separate occasions. You have also been informed you are on the schedule to see your provider for your complaints. On July 6, 2017, AHSA Cimarossa spoke to you about your complaints. You were informed once again, you need to wait until your name is on the call outs. The follow-up appointments are scheduled around emergent appointments. Back pain is non-emergent. You will be on the call outs soon to be evaluated.

>>> ~^!"MILLHOUSE, ~^!KAREEM" <59904066@inmatemessage.com> 7/6/2017 10:32 AM >>> To: BARRON Inmate Work Assignment: COVELESENCE

I SPOKE TO YOU, CIMAROSA, WARDEN ORMOND, MR LENNEN, IN ADDITION I FILED ADMINISTATIVE REMEDIES AND RECEIVED NO RELIEF!ITS NO WAY THAT USP-MCR IS IN COMPLIANCE WITH PS.6031.04!SICKCALL PROCEDURE IS INADEQUATE AND INEFFECTIVE, EACH TIME I SIGN UP FOR SICKCALL THEY SAY MY ISSUES IS CHRONIC CARE AND THEY CANT DO ANYTHING I HAD A POSTERIOR LUMBAR FUSION ON 3/8/17 MAGENTAGE OF THE WAS GONDUCTED -449-447-AND-THE DOCTOR'S CHEDULED ANOTHER FOLLOW UP FOR JULY 2017 ON ALIGHAD REDINGER AT USP-LEMSBURGTREDTO CETMENTO SIGN AREGUSAL FOR THAT FOLLOW UP SOLTHEY CAN TRANSFER MELL REGUSED AND HE CALLED THE DOCTOR TO CLEAR ME 1/124/1/1/1/WAS TRANSFERRED AND ARRIVED HERE 5/3/17 & HAVE NOT AF MY BACKBRAGE SINCE AIZALAT I NEVER HAD AN ADEQUATE INITIAL ARRIVAL DR APPOINTMENT 5/9/17 DR PERKINS SAID HE CANNOT DO ANYTHING HE IS JUST HELPING AND WORK AT USP-MANCHESTER AND THAT I WILL SEE MY PROVIDER WITHIN 14 DAYS, ITS NOW 7/6/17 AND EVERYBODY SAY WATCH THE CALL OUT! THE COLD AIR AGGRAVATE MY BACK PAIN, IBUPROFEN DOES NOTHIN, AND I'AM NOT SUPPOSE TO TAKE BECAUSE OF MY BLOOD PRESSURE MEDICATIONS!THE GABAPENTIN IS FOR THE NERVE PAIN. I HAVE SHOOTING PAIN DOWN LEFT SIDE, BURNING SENSATION AND FEELING OF MILLIONS OF PIN PRICKS. I HAVE NO RELIEF, 5/31/17 NEUROSURGEON CONSULT WAS DENIED AND STATED THAT MY PAIN CAN BE MANAGED LOCALLY AND BASICALLY USO-MCR IS SAYING THAT I CAN ONLY ADDRESS MY ISSUES EVERY 6 MONTHS ALTHOUGH CENRAL OFFICE AND REGION STATE FOLLOW UP AT SICK CALL IF YOU FEEL YOUR CONDITION CHANGE/WORSTEN! NEED MY BACK PAIN ADDRESSED. ALL THIS KEEP WATCHING THE CALL OUT GAME IS CHILDISH AND ISN'T ADDRESSING MY ISSUES.THIS IS THE ONLY INSTITUTION THAT SICK CALL CAN NOT HELP.

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50F19

EXHIBI+ T

TRULINCS 59904066 - MILLHOUSE, KAREEM - Unit: MCR-Z-A

FROM: Warden

TO: 59904066 MILLHOUSE, KAREEM SUBJECT: RE:\*\*\*Inmate to Staff Message\*\*\*

DATE: 07/17/2017 09:32 AM

An Administrative Remedy (BP9) response regarding this Issue is being finalized at this time.

>>> ~^!"MILLHOUSE, ~^!KAREEM" <59904066@inmatemessage.com> 7/8/2017 9:44 AM >>>

To: ORMOND

Inmate Work Assignment: CONVELESENCE

I SPOKE TO YOU YESTERDAY,7/7/17 AND YOU SAID SEND YOU A COP OUT! MY ISSUE IS MEDICAL AND I ADDRESSED IT TO, JONES, CIMAROSA, BARRON, LENNON, IN ADDITION I SUBMITTED AP-8/BP-9 AND THE ISSUE STILL HAS NOT BEEN ADDRESSEDION SIBMENTAL AREOSTERIOR SUMBAR DUSION SIES SION 4/17/17 IHAD A FOLLOW UP VISIT WITH OPERATING DOCTOR AT WHICH TIME HE SCHEDULED ANOTHER FOLLOW UP VISIT FOR JULY 2017. HOWEVER I WAS TRANSFERRED 4/24/17 AND ARRIVED HERE 5/3/17. ON 5/9/17 I WAS SEEN BY DR PERKINS AND HE SAID THAT HE CANNOT DO ANYTHING FOR ME BECAUSE HE IS JUST HELPING ANDWORK AT FCI-MANCHESTER HE SAID THAT I WILL BE SEEN HERE WITHIN 14 DAYS BY MY CARE PROVIDER AND EXPLAIN MY ISSUES THEN.HE ONYL RENEWED MY MEDICATIONS FOR 14 DAYS."I HAVE EXCRUCIATING BACK PAIN THAT IS AGGRAVATED BY THE COLD AIR ON UNIT". THE IBUPROFEN DOES NOTHING TO RELIEVE THAT PAIN AND I TOLD EACH DOCTOR WHO PRESCRIBED IT SINCE ASIDE FROM THAT I WAS TOLD THAT I CANNOT TAKE IBUPROFEN WHILE ON BLOOD PRESSURE MEDICATIONS ON 5/31/17 A NEUROSURGEON CONSULT WAS DENIED!SICK CALL KEEP SAYING THAT THEY CANNOT DO ANYTHING FOR ME AND THAT MY ISSUES IS CHRONIC CARE. MEANWHILE I HAVE REMEDY FROM THE MID-ATLANTIC , NORTHEAST REGION AND CENTRAL OFFICE STATING" IF YOU FEEL YOUR CONDITION HAS CHANGED/WORSTENED FOLLW UP AT SICK CALL MEDICAL DOESN'T RESPECT THAT HERE. THEY SAY MY PAIN IS NON/EMERGENT AND THAT I' AM SCHEDULED TO SEE MY PROVIDER. THAT WAS SUPPOSED TO BE 6/28/17.I NEED PAIN RELIEF. THANK YOU

Case 1:19-cv-00665-YK-EB Document 1 Filed 04/18/19 Page 15 of 30

6 OF 19

EXHIBITE!

TRULINCS 59904066 - MILLHOUSE, KAREEM - Unit: MCR-Z-A

FROM: AW
TO: 59904066 MILLHOUSE, KAREEM
SUBJECT: RE:\*\*\*Inmate to Staff Message\*\*\*
DATE: 09/06/2017 11:12 AM

If you feel you are not receiving inadequate medical care, you can start the Administrative Remedy process.

>>> ~^!"MILLHOUSE, ~^!KAREEM" <59904066@inmatemessage.com> 9/6/2017 11:36 AM >>> To: BARRON Inmate Work Assignment: CONVALESCENCE

I BEEN THROUGH ALL YOU EVER SAID AND NOTHING WAS DONE.SICK CALL KEEP SAYING THEY CAN'T DO ANYTHING FOR THE PAIN. IBUPROFEN IS NOT AND NEVER HELPED WHY AM I BEING FORCED TO TAKE SOMETHING THAT DOES NOT WORK? WHAT IS THE ISSUE HERE AT MCCREARY THAT MEDICAL WILL NOT PRESCRIBE PAIN MEDICATION THAT WORK MY BACK PAIN IS EXCRUCIATING. GABAPENTIN IS "ONLY"FOR THE NERVE PAIN. I 'AM IN PAIN AND ALM MY CONDITIONS CAN BE MANAGED LOCALLY, WHY ISN'T THAT HAPPENING? I'AM IN PAIN AND NEED MEDICATION FOR THAT PAIN THAT GABAPENTING IS "NOT"FOR. THANK YOU AND HAVE A GOOD DAY. NOTE: I WENT TO SICK CALL AFTER YOUR REPLY TO THIS "INITIAL" COP-OUT.

----AW on 8/15/2017 11:42 AM wrote:

You are prescribed Gabapentin and Ibuprofen for pain. If those pain medications are not adequate for your pain, sick call is open for you to address your concerns until you are evaluated by your provider or through chronic care clinic. You have a follow-up appointment scheduled as you have been previously advised. I trust this addresses your concerns.

>>> ~^!"MILLHOUSE, ~^!KAREEM" <59904066@inmatemessage.com> 8/13/2017 11:59 AM >>> To: BARRON Inmate Work Assignment: CONVALESCENCE

MEDICAL IS NOT DOING ANYTHING TO PROVIDE PAIN RELIEF FOR MY BACK AND FOOT PAIN CONSCIENCE OF MERCHAND AND AMERICAN THEREFORE, WHAT SHOULD I DO BECAUSE SICK CALL SAY I CAN ONLY ADDRESS CHRONIC ISSUES AT CHRONIC CARE AND IM NOT SCHEDULED FOR CHRONIC CARE ANYTIME SOON.

FOR. K. 514, MEDICAL RECORDS Rom; M:11house, K 59904066 E-207

USP-LEWISBURG 2400 ROBERT F. MILLER DRIVE LEWISBURY, PA 17837

THAT I WILL NOT GET ADEQUATE NOR EFFECTIVE MEDICAL TREATMENT. AN AUGUST 7,2018 AND AUGUST 13,2018 YOU DID NOT DOCUMENT MY SICK ALL REQUEST THAT I GAVE MS JESSICA AYERS, PA-C NOR ANY FOLLOW-UP SICK All REQUESTS THAT I SUBMITHED THROUGHOUT SEPTEMBER, 2018, D INFORMAL RESOLUTION ATTEMPT # G130-18 MRS. BROWN STATED "THERE IS NO MIDENCE YOU HAVE SIGNED OF FOR SICKCALL DURING ROUTINE ROUNDS IN YOUR DUSING UNIT." AND IN ADMINISTRATIVE REMEDY NO. 1953267-F1 IT WAS STATED All EVALUATION FOR UNADDRESSED MEDICAL CONCERNS. N ADDITION I GAVE MR ANDREW M. FDINGER, MD/CD AND MR S. BROWN, BA NUMEROUS COF-OUTS About this Issue OF DEING DENIED SICKCAIL US HOW YOUR NOT DOCUMENTING IT. I RECEIVED NO RESPONSES NOR

SENT YOU NUMEROUS COPOUTS FOR COPIES OF MY MEDICAL SCORDS FROM "APRIL 1,2017 THRU DATE GENERATED" BUT YOU SENT COPIES FROM APRIL 1,2018. ANY SUBSEQUENT REQUEST WAS ISNORED.

SENT COMPLAINTS FUR "IICENSED" EMPLOYEES ON MR ANDREW M. INSER, JESSICA AYERS, AND MR ROWANK RAWOUD TO MR C. WILLIAM FRITZ, OFFICE OF GENERAL COUNSEL AND THE JOINT COMMISSION. THE IS WIDE SPREAD CORRUPTION AT USP-LEWISBURG A CONSPIRACY IT DEPRIVE ME OF GUARANTEED U.S. CONSTITUTIONAL RIGHTS NAMELY

THE FIFTH AND GIGHTH AMENTMENT AND 18USC & 4042 (2).

HAVE NUMEROUS DIAGNOSED CONDITIONS THAT IS CAUSING EXTREME EX-CRUCIATING PAIN. FURTHERMORE, THE MOURORATHY NEUROPATHY IN IEFT FOOT HAS WORSENED AND THE TOES HAS CURIED SUCH IT I CANNOT FIT MY LEFT FOOT IN "SMU" ISSUED SHOES.

USP-LEWISHURS MEDICAL PERSONNEL IS ONERLY CONFIDENT CAUSE AN CHOCKER OBSENE PERCENTAGE OF THE LAWSuits AINST THEM WERE DISMISSED but WHAT MUST be RECOS-ED 15 "THEY WEREN'T ON THE MERITO.

I ENCOURAGE YOU, CONTINUE PARTICIPATING IN THE OSPIRACY IN VIOLATION OF 18 USC \$ 371 AND \$1001, 371. Justice Always PREVAIL AND THE CAMERAS Always Rolling, Some ONE WILL REVIEW THEM SOONER OR

SYIVIA H. RAMBO, J AND HAVE A GOOD DAY.

EXHIB! H

TO MRS KIELY, MEDICAL RECORDS

FRO	millhouse 599040000 cctober 14, 2018
	E-209
	Wolve C
*	I SENT YOU SEVERAL REQUEST FOR THE TOPE 2 PROPERTY
<u></u>	Colies of the "Emblact" RESults that was "
	Marchial To Phylone at 2018 The har
	$  Q_{-}-  $
	RECEIVE That REQUEST
\ <b>&amp;</b>	Fillberg market was Document with m
	FULLHERMORE, YOUR NOT DOCUMENTING MY BICKCALL REQUESTS COPOUTS to DREDINGER
	WOR STEVEBROWN, HSA. OR THE MEMORANDUM
~	that I Gave you About the INADEQUATE
	and INESTECTIVE MEdical treatment.
	A BRESPONSE I FECENED TODAY State
	there is NO evidence that I submitted
	these correspondences.
(1)	
*	I am IN EXCLUCIATING PAIN FERIND
	T have several DAGNOSED CONDitions
	and these games medical/HEAlth SERVICES 15 Playing will not DETER ANY Litigation DUE I EXMOUST "ADMINISTRATIVE Remedies"
	15 Playing will NOT DETER ANY Citigation
(	THE I EXMOUST "ADMINISTRATIVE Remedies"
	I Appleciate you Do your
	JOB AND SCAN - HIS IN MY File.
	(medical) 2 9 let 10-17-18
	(1) KUICHT)

Case 1:19-cv-00665-VK-FR

Inmate Name: MILLHOUSE, KAREEM

Date of Birth:

Encounter Date: 08/17/2018 12:01

Sex:

М Race: BLACK

Provider: Edinger, Andrew MD/CD

Reg #: Facility: LEW

59904-066

Unit:

E02

Hyperlipidemia, mixed, 272.2 - Current

Hypertension, Unspecified essential, 401.9 - Current

Low back pain, lumbago, 724.2 - Current

Unspecified vitamin D deficiency, 268.9 - Current

EXFII bit

PLAN:

187504-LEW

**Renew Medication Orders:** 

Rx# Medication

Order Date

Albuterol Inhaler HFA (8.5 GM) 90 MCG/ACT 08/17/2018 12:01

Prescriber Order

Don't use daily. Inhale 2 puffs by mouth 4 times a day as needed to prevent/relieve asthma attack (inhaler to last 90 days. If need more, make sick call) - "Empty container is to be returned for

refill" PRN x 90 dav(s)

Indication: Asthma, unspecified

amLODIPine 5 MG TAB 187503-LEW

08/17/2018 12:01

Take one tablet (5 MG) by mouth

each day x 180 day(s)

Indication: Hypertension, Unspecified essential

Lisinopril 20 MG Tab 187505-LEW

08/17/2018 12:01

Take one tablet by mouth each

day x 180 day(s)

Indication: Hypertension, Unspecified essential

**New Laboratory Requests:** 

**Details** 

Frequency One Time

**Due Date** 

10/29/2018 00:00

**Priority** Routine

Chronic Care Clinics-Hypertension-

Comprehensive Metabolic Profile (CMP)

Chronic Care Clinics-Hypertension-Lipid Profile

**New Consultation Requests:** 

Specialty Procedure - In house

Consultation/Procedure

Target Date Scheduled Target Date Priority 12/03/2018

12/03/2018

Routine

**Translator** Language

No

Subtype:

EMG/NCT - On-Site

Reason for Request:

Inmate has a known history of chronic low back pain. He is status-post Lumbar decompression at L5-S1 with bilateral neuroforaminotomies. He complains of new dysesthesias/paresthesias down his right leg combined with pain. This request is for an EMG of the RLE for ongoing neurologic symptoms.

**Provisional Diagnosis:** 

New L5 radiculopathy

**New Non-Medication Orders:** 

**Frequency** Order

**Duration Details**  Ordered By

Edinger, Andrew

MD/CD

Order Date:

One Time

08/17/2018

Schedule:

**Activity** 

**Blood Pressure** 

Date Scheduled Scheduled Provider

Chronic Care Visit

07/31/2019 00:00 Physician

Due 10/1/18

Disposition:

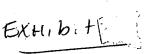
Generated 09/11/2018 12:29 by Edinger, Andrew MD/CD

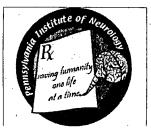
Bureau of Prisons - LEW

Page 4 of 5

Pennsylvania Institute of Neurology, Hasan Askari, MD 113 North Market Street, Selinsgrove, PA 17870 Tel: (570) 884-3243/Fax: (570) 884-3245

USP Lewisburg





Test Date: 10/4/2018

Patient: Kareem Millhouse DOB: 📆 Physician: Hasan Askari, MD Height: Ref Phys: Sex: Male Andrew Edinger, MD ID#: 59904-066 Weight: 212 lbs. Technician: None

#### **Patient Complaints:**

RLE - neuropathy

#### **NCV & EMG Findings:**

Evaluation of the right sural sensory nerve showed prolonged distal peak latency (4.1 ms) and decreased conduction velocity (Calf-Lat Mall, 34 m/s). All remaining nerves (as indicated in the following tables) were within normal limits.

All F Wave latencies were within normal limits. Left vs. Right comparison data for the tibial H-reflex indicates abnormal L-R latency difference (4.31 ms).

Needle evaluation of the right L5 paraspinal muscle showed slightly increased spontaneous activity. The right S1 paraspinal muscle showed moderately increased spontaneous activity. All remaining muscles (as indicated in the following table) showed no evidence of electrical instability.

#### Impression:

Within the technical limitations of the study, this letter physiological evidence of:

- 1. My demyelinating, distal peripheral neuropathy affecting the right sural sensory nerve at the ankle.
- 2. Otherwise the limited, pertinent nerve conduction exam of the right lower extremity is unremarkable.
- 3. EMG exam shows evidence of mild L5-S1 radiculopathy that is further supported by a relative delay in the right tibial H reflex when compared to the left side. Otherwise, limited but pertinent, EMG exam is unremarkable.

#### **Recommendations:**

- 1. Please consider MRI of lumbosacral spine.
- 2. Physical therapy consult.
- 3. Orthopedic consult.
- 4. Symptomatic care.
- 5. Further recommendations, per discretion of the referring provider.

Thank you,		
Sincerely,		•
		<del></del>
Hasan Askari M	4D	

TO! MR DOCTUL ANDREW M. EDINGER, MEDICAL

EXHIBIT

From, millhouse 59904046

NOVEMBER 22, 2018

E-210

THE Cold HAS INCVEASED THE PAIN, It's Affecting my Daily Routine. Recreation, Showers and my appetite.

All Administrative Romedy Responses State,

"Follow-up At SICKCAU IF you feel your Condition has warsened!"

SICK CALL IS not Responded Two.

- 1. FOR MOPER RECORD KEEPING PLEASE BEND REQUESTS
- 2. MUCH OF YOUR SYMPTOMS ARE LIKELY LINKED TO MUSCULAR, LIGHMENTOUS, AND ARTHRITIC CAUSES. YOU ARE CURRENTLY TAKING I BUPROFEN. IS THIS NOT HELPING?
- 3. PRESENTED YOU HAVE FAILED WITH AMITRIPTYLINE
  IN THE PAST WILL NOT BEMABLE TO GET GASAPENTING
  APPROVED FOR YOU. LINICALLY THERE IS NOT MUCH ELSE
  AVAILABLE.
  - Y. YOU ARE SCHEDULED TO SEE THE NEUROSURGEON.

TO DE EDINGED MEDICAI

John Shith And I mark.

12 OF 19

EXILIB. +1

on: millhouse, K 59404066	DECEMBER 6,2018
E-311	
TUDAY I RECEIVED THE FIRST	Cofout RESPONSE From you SWCE my
LETURN August 6,2018.	
	nd honestly never did on NOV. 8, 2018
	it was recently prescribed because I
rad my tooth pulled.) it r	elieve my toothacke but the bac
	+ Does nothing! Im just trying
	Sovetian with Door Daily Routines.
Esylon) Hed a sickcall Me	ONDAY December 3, 2018.
(I DO not have Acces	s to official cofouts Right now).
YOU HAVE FAILED VIRTUAL	LLY ALL OF THE ADJUNCTIVE
	WERE CAUGHT MIS-USING GABAPENTIN.
I WILL NOT BE ABLE TO	. <u>~ 1</u>
YOUR ARE SCHEDULED TO	$\mathcal{L}'$
OTHERWISE AMOUT	of aproxs
	M. M. Celling ms
	<u> </u>
<u> </u>	R

# Case 1:19-cv-00665-YK-EB Document 1 Filed 04/17014 (Fage 32/01/2017)

Exhib: +j
To. DI EDINGER FEBRUARY 2,2019
Rom; m. 11 house 59 904066
E-714
you very oftend and medication from storm
you never offered me formulary medication from the
EPILEOTE CATEGORY CONTROLOGO STORES Although I
told you that I Am in pain and its effecting
my Daily Routine, However, you stated that you
Cannot prescribe me any medications.
INE DATA ON USE OF EPILEPTIC MEDICATION FOR YOUR SPECIFIC
PROBLEM IS YERY LIMITED. THE STUDIES SHOW EITHER THAT
THE MEDICATION IS NOT EFFECTIVE, OR IT HAS NOT BEEN
STUDIED
THE FORMULARY MEDICINES THAT OTHER PRESCRIBERS ARE USING ARE
1) OXCARBAZEPINE - STUDIES SHOW IT IS NOT EFFECTIVE
2) CARBAMAZEPINE - HELPEUL FOR FALLAL NERVE PAINT NO PROOF FOR BAL
3) LEVATIRACETAM - STUDIES SHOW IT IS NOT EFFECTIVE
I AM WILLING TO OFFER A TRIAL OF CARBAMAZEPINE.
UNFORTUNATELY I DON'T THINK IT WILL WORK, IT REQUIRES
ROUTINE BLOOD TESTS, AND IT HAS MANY DRUG INTERACTIONS
HOW WOULD YOU LIKE TO PROCEED.
a.m. Ediguno
TO! HEALTH SERVICE

Case 1:19-cv-00665/YICEB/ Gocument 1 Filed 04/18/19 Page 23 of 30

From milliouse 59904060 2/14/19
E-214
EXhibit

you said Prescribers are using certain medications. I was on Carbanyarpine, you said you were willing to try this How about the first one you listed (OXCARDOZOPINO)? I never was an that and I need Something for the Pain.

OXCARBAZAPINE HAS BEEN STUDIED FOR YOUR PROBLEM AND IT DOES NOT WORK.

2. CARBAMATEPINE HAS NEVER BEEN STUDIED FOR YOUR PROBLEM. IT HAS SHOWN EFFECTIVENESS FOR OTHER NERVE PAIN PROBLEMS.

am Edin mo

FEB:05

Diagnosis:

#### X CXHIBIT Case 1:19-cv-00d65 y PE Gramment 1 File

NON-FORMULARY DRUG AUTHORIZATION

U.S. DEPARTMENT OF JUSTICE

FEDERAL BUREAU OF PRISONS

COFRM

And the state of t	A Productive and a second seco	integrations to the control of the c	CONTRACT OF LABOR TO THE PARTY OF THE PARTY
Patient name:		Register number:	
Requestor:		Institution	The second secon
Dyer Mitchell PA-C	200	MCCREARY USP	A region of the second of the
Drug requested: Pregabalin 75 MG Cap [Lyrica]		Drug approved:	
Dose and Regimen: 75 mg BID		The second secon	
Date requested: 04/10/2018		Expiration of order: 10/10/2018	

Acquired spondylothesis, Low Back Pain, History spinal fusion, carpal tunnel syndrome

Reason(s) why formulary agent(s) cannot be used: Inmate recently evaluated for SMU referral. Inmate was prescribed Gabapentin for condition mentions above but this medication was discontinued due to diversion. He states that he is still in severe pain and currently he is taking no medications. Record shows that he has tried other mediations in the past such as, naproxen, Elavil, Motrin, aspirin, sulindan, carbamazepine, depo-medrol injections and Tylenol #3. He is unwilling to try any of these medications again stating that they never worked. Also inmate refused to sign a refusal after extensive educations on his pain and appropriate pain management on 12/29/2017 to try formulary medications such Elavil, duloxetine, carbamazepine. He was also offered consults for pain specials as well as evaluation of his back by specialist.

Inmate does have physical exam findings as well as history of painful conditions but no motivation to try other medications or avenue of pain management other than narcotic pain relief, gabapentin or lyrica. Formulary agent(s) tried:

Cost of formulary agent: Cost of therapy: Date: Action taken: Institutional Chief Pharmacist: 04/12/2018 Refer up Stovall, Christopher PharmD

Comments:

Note on 09/12/17 states "Received a incident report written by SIS staff as well as a supporting memo from nursing staff in regards to Inmate Millhouse misusing and giving his Gabapentin to another inmate.

Duloxetine d/ced after 10 days in 2016 Carbamazepine d/ced after 1 day in 2016

Do not recommend approval. Patient has past history of diversion and refuses formulary agents.

Date: Action taken: Institution Clinical Director: 04/13/2018 Refer up Marrero, Maria F MD/RMD

Comments:

agree with ICP. Need to do adequate trial of formulary medications before requesting a non formulary.

Action taken: Date: Central Office Pharmacist: 04/13/2018 Refer up Long, Michael Regional Chief Pharmacist

Comments:

Recommend adequate trial of formulary agents. See ICP comments.

Action taken: Date: Central Office Physician: 04/16/2018 Disapproved Marrero, Maria F MD/RMD

Comments:

Generated 07/26/2018 08:38 by Casada, Melanie HIT.

Bureau of Prisons - MCR

Page 1 of 2

## se 1.19 cv-0666 Fr. Eq. Eccument 1 Eper 2418/19 Page 25 of 30

Register number: 59904-066 Drug requested: Pregabalin 75 MG Cap [Lyrica]

agree with ICP and COP. Need to do adequate trial of formulary medications before requesting a non-formulary

#### Use Criteria:

#### Y N NA

- 1-Diabetic neuropathy- well documented as insufficient functional response to duloxetine, plus at least one another mediation from the tricyclic antidepressant or antiepileptic categories.
- X 2 Post herpetic neuralgia well documented intolerance or insufficient functional response at maximally tolerated doses of tricyclic antidepressants and topical analgesics such as capsaicin cream.
  - X 3. Fibromyalgia documented diagnosis of fibromyalgia by rheumatologist, documented insufficient functional response to duloxetine, plus at least one other medication from the tricyclic antidepressant or antiepileptic categories.
- 4. Partial onset seizures well documented intolerance or insufficient response to at least two other agents (i.e. carbamazepine, lamotrigine, levetiracetam, phenytoin, toplramate)

Filed 04/18/19 Page 26 of 30 Case 1:19-cv-00665-YK-Document 4

### **Bureau of Prisons Health Services Clinical Encounter - Administrative Note**

Inmate Name:

\_MILLHOUSE, KAREEM

Sex: Provider: Race: BLACK

Reg #:

59904-066

Date of Birth: Note Date:

03/12/2019 07:25

Ayers, Jessie PA-C

Facility: Unit:

**LEW** E02

Admin Note - General Administrative Note encounter performed at Health Services.

**Administrative Notes:** 

**ADMINISTRATIVE NOTE 1** 

Provider: Ayers, Jessie PA-C

Inmate stopped me to discuss pain medication for both his hand and his chronic pain issues. It was noted during encounter that Inmate Millhouse was not wearing the splint which Dr. Edinger had made him due to the fracture in his hand. Stressed to inmate that he must wear splint at all times due to risk of worsening injury or improper healing. Inmate is currently awaiting further evaluation of fracture.

Copay Required: No

Cosign Required: No

Telephone/Verbal Order: No

Completed by Ayers, Jessie PA-C on 03/12/2019 07:29

Case 1:19-cv-00665-YK-EB Document 1 Filed 04/18/19 Page 27 of 30 U.S. Department of Justice

Via Certified and Return Receipt Mail

Federal Bureau of Prisons

Northeast Regional Office

U.S. Custom House-7th Floor 2nd & Chestnut Streets Philadelphia, PA 19106

March 27, 2019

Mr. Kareem Millhouse, Reg. No. 59904-066 USP Lewisburg P.O. Box 1000 Lewisburg, PA 17837

RE: Administrative Claim No. TRT-NER-2019-00477.

Dear Mr. Millhouse:

Your Administrative Claim No. TRT-NER-2019-00477 properly received on October 22, 2018, has been considered for settlement as provided by the Federal Tort Claims Act (FTCA), 28 U.S.C. § 2672, under authority delegated to me by 28 C.F.R. § 543.30. Damages are sought in the amount of \$100,000.00, for personal injury. Specifically, you allege you have been denied appropriate medical care at USP Lewisburg on an ongoing and continuous basis.

An investigation reflects you have been given medical treatment at USP Lewisburg that meets or exceeds community standards. There is no evidence to suggest you experienced a compensable loss as the result of negligence on the part of a Bureau of Prisons employee. Accordingly, your claim is denied.

If you are dissatisfied with this decision, you may bring an action against the United States in an appropriate United States District Court within six (6) months of the date of this letter.

Sincerely,

Darrin Howard Regional Counsel

cc: David J. Ebbert, Warden, USP Lewisburg

Case 1:19-cv-00665-YK-EB Document 1 Filed 04/18/19 Page 28 of 30 U.S. Department of Justice

190F19

Federal Bureau of Prisons

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Via Certified and Return Receipt Mail

Northeast Regional Office

U.S. Custom House-7th Floor 2nd & Chestnut Streets Philadelphia, PA 19106

March 27, 2019

Mr. Kareem Millhouse, Reg. No. 59904-066 USP Lewisburg P.O. Box 1000 Lewisburg, PA 17837

RE: Administrative Claim No. TRT-NER-2019-00478

Dear Mr. Millhouse:

Your Administrative Claim No. TRT-NER-2019-00478 properly received on October 22, 2018, has been considered for settlement as provided by the Federal Tort Claims Act (FTCA), 28 U.S.C. § 2672, under authority delegated to me by 28 C.F.R. § 543.30. Damages are sought in the amount of \$200,000.00, for personal injury. Specifically, you allege you have been denied appropriate medical care at USP Lewisburg on an ongoing and continuous basis.

An investigation reflects you have been given medical treatment at USP Lewisburg that meets or exceeds community standards. There is no evidence to suggest you experienced a compensable loss as the result of negligence on the part of a Bureau of Prisons employee. Accordingly, your claim is denied.

If you are dissatisfied with this decision, you may bring an action against the United States in an appropriate United States District Court within six (6) months of the date of this letter.

Sincorely,

Darrin Howard Regional Counsel

cc: David J. Ebbert, Warden, USP Lewisburg

APRIL 11,2019

DEAR

CIERK OF COUR+

Hello,

ME A CERTIFIED COPY OF THE ENCLOSED COMPLAINT.

THANK YOU.

KILL Derse

I LEED JUSTIN, CIEKK

MUSSIGN STRIKT OF PENNSYMWIA

WITH AN JUSTING TO TEOCRAF RUING

SSE WARM WASHING TO A VIEWUE

ROWN IINS

A VECTOR LESSAM

RECEIVED SCRANTON APR 18 2019 PER DEPUNCE